IN THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF PUERTO RICO

YADIRA VARGAS TIRADO * CHAPTER 13

DEBTOR * BKRTCY. NO. 16-08946 BKT

* CHAPTER 13

DEBTOR'S NOTICE OF FILING OF AMENDED SCHEDULES "I" and "J" OFFICIAL FORMS 106I & 106J

TO THE HONORABLE COURT:

COMES NOW, YADIRA VARGAS TIRADO, the Debtor in the above captioned case, through the undersigned attorney, and very respectfully states and prays as follows:

- 1. The Debtor is hereby submitting **Amended Schedules "I" and "J"**, dated July 13, 2018, herewith and attached to this motion.
- 2. The amended Schedules "I" and "J" to reflect the Debtor's actual monthly income (social security disability benefits) and the Debtor's actual monthly household expenses, in the above captioned case.

NOTICE PURSUANT TO LOCAL BANKRUPTCY RULE 1009(b)

Within thirty (30) days after service as evidenced by the certification, and an additional three (3) days pursuant to Fed. R. Bank. P. 9006(f) if you were served by mail, any party against whom this paper has been served, or any other party to the action who objects to the relief sought herein, shall serve and file an objection or other appropriate response to this paper with the Clerk's office of the U.S. Bankruptcy Court for the District of Puerto Rico. If no objection or other response is filed within the time allowed herein, the paper will be deemed unopposed and may be granted unless: (i) the requested relief is forbidden by law; (ii) the requested relief is against public policy; or (iii) in the opinion of the Court, the interest of justice requires otherwise.

Page -2-Notice of Amended Schedule "I" & "J" Case no. 16-08946 BKT13

CERTIFICATE OF SERVICE

I CERTIFY, that on this same date a copy of this Notice was filed with the Clerk of the Court using the CM/ECF system which will send notice of same to the Chapter 13 Trustee, the US Trustee's Office, and to all CM/ECF participants; I also certify that a copy of this notice was sent via regular US mail to the Debtor and to all creditors and interested parties appearing in the master address list (CM/ECF non-participants), hereby attached.

RESPECTFULLY SUBMITTED. In San Juan, Puerto Rico, this 16th day of July, 2018.

/s/Roberto Figueroa Carrasquillo
USDC #203614
RFIGUEROA CARRASQUILLO LAW OFFICE PSC
ATTORNEY FOR the DEBTOR
PO BOX 186 CAGUAS PR 00726
TEL NO 787-744-7699 FAX 787-746-5294
Email: rfigueroa@rfclawpr.com

Fill in this information	to identify your case:	
Debtor 1	YADIRA VARGAS TIRADO	
Debtor 2 (Spouse, if filing)		
United States Bankrup	ptcy Court for the: DISTRICT OF PUERTO RICO, SAN JUAN DIVISION	
	16-bk-8946	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Form	1 1061	MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question

	information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with information about additional	Employment status	Employed	☐ Employed
			Not employed	☐ Not employed
	employers.	Occupation	Disability Pension	
	Include part-time, seasonal, or self-employed work.	Employer's name	Social Security Administration	
	Occupation may include student or homemaker, if it applies.	Employer's address	30 Padial St Gatsby Bldg Suite 328	
			Caguas, PR 00725-3840	

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 N/A 2. deductions). If not paid monthly, calculate what the monthly wage would be. 2. Estimate and list monthly overtime pay. 0.00 N/A 3. Calculate gross Income. Add line 2 + line 3. 0.00 N/A

Official Form 106I Schedule I: Your Income page 1

				For	Debtor 1	D-216-2000	Debtor 2 or -filing spouse
	Сору	/ line 4 here	4.	\$_	0.00	\$	N/A
	List a	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	0.00	\$_	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$_	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$_	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$_	N/A
	5e.	Insurance	5e.	\$_	0.00	\$_	N/A
	5f.	Domestic support obligations	5f.	\$_	0.00	\$_	N/A
	5g.	Union dues	5g.	\$_	0.00	\$_	N/A
	5h.	Other deductions. Specify:	5h.+	* _	0.00	+ \$_	N/A
	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ _	0.00	\$_	N/A
	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ _	0.00	\$_	N/A
	List a	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	450.00	\$	N/A
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A
	8e.	Social Security	8e.	\$	850.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	s	0.00	\$	N/A
	8g.	Pension or retirement income	— 8g.	s-	0.00	s-	N/A
	8h.	Other monthly income. Specify:	8h	_	0.00	+ \$_	N/A
	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,300.00	\$_	N/A
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		1,300.00 + \$		N/A = \$ 1,300
	Inclu	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your dir friends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not avoify:	epende				dule J. 11. +\$C
	Add Write	the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain	ult is the	e com ies and	bined monthly ind d Related <i>Data</i> , if	come. it appli	
	Dos	you expect an increase or decrease within the year after you file this form	?				Combined monthly incom
-	=	No.					

Official Form 106I Schedule I: Your Income

Fill	in this information to identify your case:					
Deb	tor 1 YADIRA VARGAS TIRADO			Check	if this is:	
				■ A	n amended filing	
	tor 2			_	supplement show	ng postpetition chapter 1 following date:
(Opt	odoc, ii iiiiig)			_		
Unit	ed States Bankruptcy Court for the: DISTRICT OF PUB DIVISION	ERTO RICO, SA	N JUAN	N	MM / DD / YYYY	
Coo	e number 3:16-bk-8946					
	nown)	-				
0	fficial Form 106J					
	chedule J: Your Expenses					12
info	as complete and accurate as possible. If two marrormation. If more space is needed, attach another (nown). Answer every question. 11: Describe Your Household	ied people are f sheet to this fo	filing together, both a rm. On the top of any	are equally additiona	responsible for s I pages, write you	upplying correct ir name and case numl
1.	Is this a joint case?					
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate househousehousehousehousehousehousehouse	old?				
	□ No					
	☐ Yes. Debtor 2 must file Official Form 10	6J-2,Expenses fo	or Separate Househol	d of Debtor	2.	
2.	Do you have dependents?					
	DO 1101 1101 DODIE 1 4110 1 C3.	information for ndent	Dependent's relation Debtor 1 or Debtor 2	- 1.00 to 10	Dependent's age	Does dependent live with you?
	Do not state the					□No
	dependents names.					☐ Yes
						□ No
						☐ Yes
						□ No □ Yes
						□ Yes
						☐ Yes
3.	Do your expenses include					Li Tes
٥.	expenses of people other than					
	yourself and your dependents?					
Par	t 2: Estimate Your Ongoing Monthly Expense	e				
Est	timate your expenses as of your bankruptcy filing benses as of a date after the bankruptcy is filed. If blicable date.	date unless yo	u are using this form emental <i>Schedule J</i> , o	as a supp check the b	lement in a Chapt ox at the top of the	er 13 case to report ne form and fill in the
val	lude expenses paid for with non-cash governmen ue of such assistance and have included it on Sci ficial Form 106l.)				Your exp	enses
4.	The rental or home ownership expenses for you payments and any rent for the ground or lot.	ır residence. Ind	clude first mortgage	4. \$		398.56
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance			4b. \$	-	0.00
	4c. Home maintenance, repair, and upkeep exp			4c. \$		20.00
	4d. Homeowner's association or condominium d			4d. \$		0.00
5.	Additional mortgage payments for your residen	ce, such as hom	e equity loans	5. \$		0.00

ebto	1 VARGAS TIRADO, YADIRA	Case numb	er (if known)	3:16-bk-8946
1	Itilities:			
_	a. Electricity, heat, natural gas	6a.	\$	0.00
	b. Water, sewer, garbage collection	6b.	\$	0.00
	c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
	d. Other. Specify:	6d.	\$	0.00
-	ood and housekeeping supplies	7.	\$	219.44
	childcare and children's education costs	8.	\$	0.00
-45	Clothing, laundry, and dry cleaning		\$	50.00
	ersonal care products and services	10.	\$	55.00
	Medical and dental expenses		\$	0.00
T	ransportation. Include gas, maintenance, bus or train fare.	12.	-	207.00
	o not include car payments. Intertainment, clubs, recreation, newspapers, magazines, and books	13.		50.00
		14.		0.00
	charitable contributions and religious donations	14.	·	0.00
	nsurance. So not include insurance deducted from your pay or included in lines 4 or 20.			
- 1	5a. Life insurance	15a.	\$	0.00
	5b. Health insurance	15b.		0.00
	5c. Vehicle insurance	15c.		0.00
	5d. Other insurance. Specify:	15d.		0.00
	axes. Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00
S	Specify:	16.	\$	0.00
	nstallment or lease payments: 7a. Car payments for Vehicle 1	17a.	\$	0.00
	7b. Car payments for Vehicle 2	17b.	\$	0.00
	7c. Other. Specify:	17c.	\$	0.00
	7d. Other. Specify:	17d.	\$	0.00
	our payments of alimony, maintenance, and support that you did not report as			
C	leducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
(Other payments you make to support others who do not live with you.		\$	0.00
5	Specify:	19.		
	Other real property expenses not included in lines 4 or 5 of this form or on Sche			0.00
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.		0.00
2	20c. Property, homeowner's, or renter's insurance	20c.		0.00
2	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
2	Oe. Homeowner's association or condominium dues	20e.		0.00
(Other: Specify:	21.	+\$	0.00
	Calculate your monthly expenses			4 4 4 4 4 4 4
	22a. Add lines 4 through 21.		\$	1,000.00
2	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
2	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,000.00
(Calculate your monthly net income.	7000		
2	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,300.00
2	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	1,000.00
2	23c. Subtract your monthly expenses from your monthly income.	00-	•	300.00
	The result is your monthly net income.	23c.	P	300.00
F	Do you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect you modification to the terms of your mortgage?	u file this four mortgage p	orm? ayment to incre	ease or decrease because of
	No.			
1	Types Explain here:			

Official Form 106J

Fill in this information to identify your case:						
YADIRA VARGAS TIRADO						
irst Name	Middle Name	Last Name				
irst Name	Middle Name	Last Name				
ptcy Court for the:	DISTRICT OF PUERTO	RICO, SAN JUAN DIVISION				
S-bk-8946						
	YADIRA VARGAS First Name Iptcy Court for the: 6-bk-8946	First Name Middle Name Middle Name Iptcy Court for the: DISTRICT OF PUERTO	Middle Name Last Name First Name Middle Name Last Name Iptcy Court for the: DISTRICT OF PUERTO RICO, SAN JUAN DIVISION			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorney t	to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read the summary that they are true and correct. X ADIRA VARGAS TIRADO Signature of Debtor 1 Date July 13, 2018	x and schedules filed with this declaration and X Signature of Debtor 2 Date

Label Matrix for local noticing 0104-3 Case 16-08946-BKT13 District of Puerto Rico Old San Juan Mon Jul 16 10:44:40 AST 2018

US Bankruptcy Court District of P.R. Jose V Toledo Fed Bldg & US Courthouse 300 Recinto Sur Street, Room 109 San Juan, PR 00901-1964

DLJ MORTGAGE CAPITAL., INC MARTINEZ & TORRES LAW OFFICES, P.S.C PO.BOX 192938 SAN JUAN, PR 00919-3409

EASTERN AMERICA INSURANCE CO PO BOX 9023862 SAN JUAN, PR 00902-3862

LVNV Funding, LLC its successors and assigns assignee of Citibank USA, N. A.

Resurgent Capital Services
PO Box 10587

Greenville, SC 29603-0587

POPULAR AUTO
BANKRUPTCY DEPARTMENT
PO BOX 366818
SAN JUAN PUERTO RICO 00936-6818

Select Portfolio Svcin PO Box 65250 Salt Lake City, UT 84165-0250

ROBERTO FIGUEROA CARRASQUILLO PO BOX 186 CAGUAS, PR 00726-0186 DLJ MORTGAGE CAPITAL INC.,
MARTINEZ & TORRES LAW OFFICES PSC
PO. BOX 192938
SAN JUAN,, PR 00919-3409

BANCO POPULAR DE PUERTO RICO BANKRUPTCY DEPARTMENT PO BOX 366818 SAN JUAN PR 00936-6818

DLJ Mortgage Capital, Inc. 11 Madison Ave New York, NY 10010-3629

Ismael Lpez Pagn Urb Veredas del Mar A 13 13th St Salinas, PR 00750

Lcdo. Edgar A. Vega PO Box 366818 San Juan, PR 00936-6818

PREPA - BANKRUPTCY OFFICE PO BOX 364267 SAN JUAN PR 00936-4267

JOSE RAMON CARRION MORALES PO BOX 9023884 SAN JUAN, PR 00902-3884

YADIRA VARGAS TIRADO HC 43 BOX 12141 CAYEY, PR 00736-9240 POPULAR AUTO PO BOX 366818 SAN JUAN, PR 00936-6818

Bp-Auto PO Box 363228 San Juan, PR 00936-3228

DTOP PO Box 41269 Minillas Station San Juan, PR 00940-1269

LVNV Funding, LLC its successors and assigns assignee of Arrow Financial Services,
LLC
Resurgent Capital Services
PO Box 10587
Greenville, SC 29603-0587
Martinez & Torres Law Offices PSC

Martinez & Torres Law Offices PSC PO Box 192938 San Juan, PR 00919-3409

Rosa Ruiz Perez Urb Monte Real A 36 Trinitaria St Guayama, PR 00784

MONSITA LECAROZ ARRIBAS
OFFICE OF THE US TRUSTEE (UST)
OCHOA BUILDING
500 TANCA STREET SUITE 301
SAN JUAN, PR 00901

End of Label Matrix
Mailable recipients 22
Bypassed recipients 0
Total 22